

LIS000022843

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

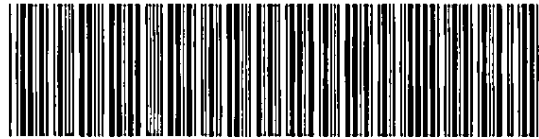
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17 JUL 24 PM 3:04  
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TALLAHASSEE, FLORIDA

S. WARREN

JUL 27 2017



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 13, 2017

JOAO PEDRO VOLZ  
150 SE 2ND AVE, SUITE 505  
MIAMI, FL 33131

SUBJECT: VD&T CONSULTING LLC  
Ref. Number: L15000022843

We have received your document for VD&T CONSULTING LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Stacey M Warren  
Regulatory Specialist II

Letter Number: 817A00014239

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** VD&T CONSULTING LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JOAO PEDRO VOLZ

\_\_\_\_\_  
Name of Person

VD&T INTERNATIONAL

\_\_\_\_\_  
Firm/Company

150 SE 2ND AVE SUITE 505

\_\_\_\_\_  
Address

MIAMI, FL 33131

\_\_\_\_\_  
City/State and Zip Code

management@vdtinternational.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JOAO PEDRO VOLZ

305 8781516  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

VPT Corporate Services LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/05/2015 and assigned  
Florida document number L15000022843.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: UBC HOLDINGS LLC

New Registered Office Address: 150 SE 2ND AVE, SUITE 505  
*Enter Florida street address*

MIAMI, Florida 33131  
*City Zip Code*

**New Registered Agent's Signature, if changing Registered Agent:**

*I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

If Changing Registered Agent, Signature of New Registered Agent

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JUL 21 2015  
3:04  
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OF  
FLORIDA  
TALLAHASSEE

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	JOAO PEDRO VOLZ	150 SE 2ND AVE, SUITE 505	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	MIGUEL A. VALDES	150 SE 2ND AVE, SUITE 505	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	DANIEL MERLINO	150 SE 2ND AVE, SUITE 505	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	VD&T International LLC	150 SE 2ND AVE	<input type="checkbox"/> Add
		SUITE 505	<input checked="" type="checkbox"/> Remove
		MIAMI, FL 33131	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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FLORIDA  
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COURT

[illegible]

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated JULY 21st 2017

Signature of a member or authorized representative of a member

JOAO PEDRO VOLZ

Typed or printed name of signee

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U.S. DISTRICT COURT  
FALLS CHURCH, VIRGINIA